

INVOICE SUBMITTAL CHECKLIST

District 4 Local Programs

Financial Project Id:	Date:
Contract #:	
Project Name:	
Project Begins:	
Project Ends:	
Type of Agreement:	□TRIP
Invoice #:	
Final Invoice?	□Yes □No
If No, what percentage of work (in dollars) is complete?	
If Yes, is the retainage being paid out?	□Yes □No
Has the Final Inspection Acceptance (FIA) form been approved?	□Yes □No
Is there a material certification letter?	□Yes □No
Have there been any amendments? (supplemental, time extensions)	□Yes □No
If yes, please explain:	
Are there any progress reports in the invoice package?	∐Yes ∐No
Change Orders?	∐Yes ∐No
Change Orders #	
Amount of the change order:	
Date approved by FDOT:	DV DN-
FDOT Participating?	∐Yes ∐No
Does the project have two or more FM#/Project#?	∐Yes ∐No
If yes, what is the amount of split?	
FM# FM#	
What retainage is being held?	
Reduced from previous invoice?	□Yes □No
If yes, please explain:	
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Additional comments to Auditor:	

Actions Needed:

Highlight all Non-Participating items